

HCBS & NF Reimbursement

KDADS PRESENTATION TO THE HOUSE SOCIAL SERVICES BUDGET COMMITTEE

Presented by:
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HCBS Waiver Funding

All HCBS waivers are funded with a mix of state funds and a federal share that is calculated based on Kansas' Federal Medical Assistance Percentage (FMAP).

- The FMAP is computed from a formula that takes into account the average per capita income for each state relative to the national average.
- The federal government pays a larger portion of Medicaid costs in states with lower per capita incomes relative to the national average and vice versa for states with higher per capita incomes.
- For State Fiscal Year 2022, the blended FMAP rate for Kansas is approximately 60% (This does not include the 10% FMAP Enhancement).

HCBS Waiver Funding

Medicaid Managed Care

In Kansas, Medicaid services are delivered through a Managed Care health care delivery system called KanCare.

- Managed care is designed and organized to manage cost, utilization, and quality.
- Managed care provides for the delivery of Medicaid benefits and additional services through contracted arrangements between state Medicaid agencies and managed care organizations (MCOs).
- MCOs accept a set per member per month (capitation) payment to provide Medicaid health benefits and additional services.

Kansas currently contracts with three MCOs to provide services through KanCare: Aetna Better Health of Kansas; Sunflower Health Plan; and United Health Care.

HCBS Reimbursement Rates

Managed Care Floor Rates

In managed care, the State sets the Medicaid floor rate for each covered service. The floor rate is the lowest rate an MCO is permitted to pay a provider per unit of service.

The following tables show the KanCare Medicaid floor rates from FY 2017 to present.

Physical Disability (PD)						
Service	Procedure Code	FY2017	FY2018	FY2019	FY2020	Unit Definition
Personal Services/Agency-Directed	S5125 U9	\$3.27	\$3.37	\$3.50	\$3.56	15 min
Personal Services Self-Directed	S5125 U6	\$2.83	\$2.92	\$3.04	\$3.08	15 min
Financial Management Services	T2040 U2	\$115.00	\$118.45	\$123.19	\$125.04	1 month
Home-Delivered Meals	S5170	\$5.55	\$5.72	\$5.95	\$6.04	1 meal
Medication Reminder	S5185	\$15.91	\$16.39	\$17.05	\$17.30	1 month
Medication Reminder Dispenser	T1505 U6	\$25.00	\$25.75	\$26.78	\$27.18	1 month
Medication Reminder/Dispenser Installation	T1505	\$25.00	\$25.75	\$26.78	\$27.18	1 install
Personal Emergency Response System	S5161	\$35.00	\$36.05	\$37.49	\$38.05	1 month
PERS Installation	S5160	\$50.00	\$51.50	\$53.56	\$54.36	1 install
Sleep Cycle Support/Enhanced Care Service	T2025	\$78.30	\$80.65	\$83.88	\$85.13	6 or 12 hrs

HCBS Reimbursement Rates

Managed Care Floor Rates

BRAIN INJURY (BI)						
Service	Procedure Code	FY2017	FY2018	FY2019	FY2020	Unit Definition
Behavior Therapy	H0004	\$17.46	\$17.99	\$18.71	\$18.99	15 min
Cognitive Rehabilitation	G0515	\$17.46	\$17.99	\$18.71	\$18.99	15 min
Financial Management Services	T2040 U2	\$115.00	\$118.45	\$123.19	\$125.04	1 month
Home-Delivered Meals	S5170	\$5.55	\$5.72	\$5.95	\$6.04	1 meal
Medication Reminder	S5185	\$15.91	\$16.39	\$17.05	\$17.30	1 month
Medication Reminder/Dispenser	T1505 UB	\$25.00	\$25.75	\$26.78	\$27.18	1 month
Medication Reminder/Dispenser Installation	T1505	\$25.00	\$25.75	\$26.78	\$27.18	1 install
Occupational Therapy	G0152	\$17.46	\$17.99	\$18.71	\$18.99	15 min
Personal Emergency Response System	S5161	\$35.00	\$36.05	\$37.49	\$38.05	1 install
PERS Installation	S5160	\$50.00	\$51.50	\$53.56	\$54.36	1 month
Personal Services/Agency-Directed	S5125 U9	\$3.38	\$3.49	\$3.63	\$3.68	15 min
Personal Services/Self-Directed	S5125 UB	\$2.98	\$3.07	\$3.19	\$3.24	15 min
Physical Therapy	G0151	\$17.46	\$17.99	\$18.71	\$18.99	15 min
Sleep Cycle Support/Enhanced Care Service	T2025	\$78.30	\$80.65	\$83.88	\$85.13	6 to 12 hrs
Speech-Language Therapy	G0153	\$17.46	\$17.99	\$18.71	\$18.99	15 min
Transitional Living Skills	H2014	\$6.89	\$7.10	\$7.38	\$7.49	15 min

HCBS Reimbursement Rates

Managed Care Floor Rates

Frail Elderly (FE)						
Service	Procedure Code	FY2017	FY2018	FY2019	FY2020	Unit Definition
Adult Day Care (1-5 hours)	S5101	\$21.93	\$22.59	\$23.49	\$23.85	1 to 5 hrs
Adult Day Care (5 plus hours)	S5102	\$43.86	\$45.18	\$46.99	\$47.69	5 plus hrs
Personal Care Services Level 1	S5130	\$3.38	\$3.49	\$3.63	\$3.68	15 min
Personal Care Services Level 2	S5125	\$3.73	\$3.85	\$4.00	\$4.06	15 min
Personal Care Services Level 3	S5125 UA	\$4.12	\$4.25	\$4.42	\$4.49	15 min
Personal Care Services (self-direct)	S5125 UD	\$2.71	\$2.80	\$2.91	\$2.96	15 min
Comprehensive Support (provider directed)	S5135	\$3.38	\$3.49	\$3.63	\$3.68	15 min
Comprehensive Support (self-directed)	S5135 UD	\$2.71	\$2.80	\$2.91	\$2.96	15 min
Financial Management Services	T2040 U2	\$115.00	\$118.45	\$123.19	\$125.04	1 month
Home telehealth (install)	S0315	\$70.00	\$72.10	\$74.98	\$76.11	1 install
Home telehealth (rental)	S0317	\$6.00	\$6.18	\$6.43	\$6.52	1 day
Medication reminder	S5185	\$15.91	\$16.39	\$17.05	\$17.30	1 month
Nurse Evaluation visit	T1001	\$39.37	\$40.56	\$42.18	\$42.82	1 visit
PERS (install)	S5160	\$56.25	\$57.94	\$60.26	\$61.16	1 install
PERS (rental)	S5161	\$26.52	\$27.32	\$28.41	\$28.84	1 month
Sleep Cycle Support/Enhanced Care Service	T2025	\$78.30	\$80.65	\$83.88	\$85.13	6 to 12 hrs
Wellness Monitoring	S5190	\$39.37	\$40.56	\$42.18	\$42.82	1 visit

HCBS Reimbursement Rates

Managed Care Floor Rates

Autism (AU)						
Service	Procedure Code	FY2017	FY2018	FY2019	FY2020	Unit Defintion
Respite	T1005	\$3.00	\$3.09	\$3.21	\$3.26	15 min
Parent Support (individual rate)	T1027	\$6.25	\$6.43	\$6.69	\$6.79	15 min
Parent Support (group rate)	T1027 HQ	\$3.00	\$3.09	\$3.21	\$3.26	15 min
Family Adjusted Counseling (Individual rate)	S9482	\$10.00	\$10.30	\$10.71	\$10.87	15 min
Family Adjusted Counseling (group rate)	S9482 HQ	\$5.00	\$5.15	\$5.36	\$5.44	15 min

Technology Assisted (TA)							
HCBS/TA Services	Procedure Code	FY2017	FY2018	FY2019	FY2020	FY2022	Unit Defintion
Health Maintenance Monitoring	T1001	\$70.00	\$72.10	\$74.98	\$76.11	\$76.11	1 visit
Intermittent Intensive Medical Care	T1002	\$8.00	\$8.24	\$8.57	\$8.70	\$8.70	15 min
Specialized Medical Care	T1000	\$7.25	\$7.47	\$7.77	\$7.89	\$10.75	15 min
Personal Care Services - Agency Directed	T1004	\$4.25	\$4.38	\$4.56	\$4.62	\$4.62	15 min
Personal Care Services - Self Directed	T1019	\$3.32	\$3.42	\$3.56	\$3.61	3.610152	15 min
Medical Respite Care	T1005	\$7.00	\$7.21	\$7.50	\$7.61	7.610876	15 min
Financial Management Services	T2040 U2	\$115.00	\$118.45	\$123.19	\$125.04	125.03582	1 month

HCBS Reimbursement Rates

Managed Care Floor Rates

SED Waiver						
Services	Procedure Code	FY2017	FY2018	FY2019	FY2020	Unit Definition
Attendant Care—SED Waiver	T1019-HK	\$6.00	\$6.18	\$6.43	\$6.52	15 min
Independent Living / Skills Building	T2038	\$40.00	\$41.20	\$42.85	\$43.49	1 hr
Parent Support and Training – Individual	S5110	\$10.00	\$10.30	\$10.71	\$10.87	15 min
Parent Support and Training - Group	S5110-TJ	\$3.00	\$3.09	\$3.21	\$3.26	15 min
Professional Resource Family Care	S9485	\$138.00	\$142.14	\$147.83	\$150.04	1 day
Short Term Respite Care	S5150	\$6.00	\$6.18	\$6.43	\$6.52	15 min
Wraparound Facilitation	H2021	\$20.00	\$20.60	\$21.42	\$21.75	15 min

HCBS Reimbursement Rates

Managed Care Floor Rates

Intellectual/ Developmental Disabilities (I/DD)									
Services	Procedure Code	FY2017	FY2018	FY2019	FY2020	FY2021 Rate (7/1/20 to 3/31/21)	FY2021 Rate (4/1/21 to 6/30/21)	FY2022	Unit Definition
Overnight Respite	H0045	\$78.30	\$80.65	\$83.88	\$85.13	\$85.13	\$89.39	\$91.18	up to 24 hrs
Personal Care Services	T1019	\$2.64	\$2.72	\$2.83	\$2.87	\$2.87	\$3.01	\$3.08	15 min
Sleep Cycle Support/Enhanced Care Service	T2025	\$78.30	\$80.65	\$83.88	\$85.13	\$85.13	\$89.39	\$91.18	up to 12 hrs / min 8 hrs
Specialized Medical Care (RN)	T1000 TD	\$7.50	\$7.73	\$8.04	\$8.16	\$8.16	\$8.57	\$8.74	15 min
Specialized Medical Care (LPN)	T1000	\$7.00	\$7.21	\$7.50	\$7.61	\$7.61	\$7.99	\$8.15	15 min
Supportive Home Care	S5125	\$3.06	\$3.16	\$3.29	\$3.34	\$3.34	\$3.50	\$3.57	15 min
Supported Employment	H2023	\$3.06	\$3.16	\$3.29	\$3.34	\$3.34	\$3.50	\$3.57	15 min
Medical Alert Rental	S5161	\$15.00	\$15.45	\$16.07	\$16.31	\$16.31	\$17.12	\$17.47	1 month
Financial Management Services	T2040 U2	\$115.00	\$118.45	\$123.19	\$125.04	\$125.04	\$131.29	\$133.91	1 month
Wellness Monitoring	S5190	\$35.00	\$36.05	\$37.49	\$38.05	\$38.05	\$39.96	\$40.76	1 visit
Resident Supports (adult)	T2016	See tiered rates							1 day
Resident Supports (Child)	T2016	See tiered rates							1 day
Day Supports - Day Supports	T2021	See tiered rates							15 min
Day Supports - Pre-Vocational Supports	T2021	See tiered rates							15 min

HCBS Reimbursement Rates

Managed Care Floor Rates

HCBS I/DD Reimbursement Tiered Rates									
HCBS/IDD Tiered Services	Procedure Code	FY2017 Rate	FY2018 Rate	FY2019 Rate	FY2020 Rate	FY2021 Rate (7/1/20 to 3/31/21)	FY2021 Rate (4/1/21 to 6/30/21)	FY2022 Rate	Unit Definition
Residential Suports									
Regular Tier 1	T2016	\$160.21	\$165.02	\$171.62	\$174.20	\$174.20	\$182.90	\$186.56	1 day
Regular Tier 2	T2016	\$131.22	\$135.16	\$140.57	\$142.67	\$142.67	\$149.81	\$152.80	
Regular Tier 3	T2016	\$94.86	\$97.71	\$101.62	\$103.14	\$103.14	\$108.30	\$110.47	
Regular Tier 4	T2016	\$61.26	\$63.10	\$65.62	\$66.61	\$66.61	\$69.94	\$71.34	
Regular Tier 5	T2016	\$44.27	\$45.60	\$47.42	\$48.14	\$48.14	\$50.54	\$51.55	
Super Tier 1	T2016	\$192.05	\$197.81	\$205.72	\$208.81	\$208.81	\$219.25	\$223.63	
Super Tier 2	T2016	\$171.36	\$176.50	\$183.56	\$186.31	\$186.31	\$195.63	\$199.54	
Super Tier 3	T2016	\$152.56	\$157.14	\$163.43	\$165.88	\$165.88	\$174.17	\$177.65	
Super Tier 4	T2016	\$133.74	\$137.75	\$143.26	\$145.41	\$145.41	\$152.68	\$155.73	
Super Tier 5	T2016	\$114.55	\$117.99	\$122.71	\$124.55	\$124.55	\$130.78	\$133.39	
Day Supports									
Regular Tier 1	T2021	\$4.98	\$5.13	\$5.34	\$5.42	\$5.42	\$5.69	\$5.80	15 minutes
Regular Tier 2	T2021	\$3.68	\$3.79	\$3.94	\$4.00	\$4.00	\$4.20	\$4.28	
Regular Tier 3	T2021	\$2.96	\$3.05	\$3.17	\$3.22	\$3.22	\$3.38	\$3.45	
Regular Tier 4	T2021	\$2.18	\$2.25	\$2.34	\$2.38	\$2.38	\$2.49	\$2.54	
Regular Tier 5	T2021	\$1.87	\$1.93	\$2.01	\$2.04	\$2.04	\$2.14	\$2.18	
Super Tier 1	T2021	\$6.04	\$6.22	\$6.47	\$6.57	\$6.57	\$6.89	\$7.03	
Super Tier 2	T2021	\$5.56	\$5.73	\$5.96	\$6.05	\$6.05	\$6.35	\$6.48	
Super Tier 3	T2021	\$5.12	\$5.27	\$5.48	\$5.56	\$5.56	\$5.84	\$5.96	
Super Tier 4	T2021	\$4.67	\$4.81	\$5.00	\$5.08	\$5.08	\$5.33	\$5.44	
Super Tier 5	T2021	\$4.27	\$4.40	\$4.58	\$4.64	\$4.64	\$4.88	\$4.97	

HCBS Reimbursement Rates

Flexibilities in Managed Care

Because Kansas utilizes a Managed Care system to deliver Medicaid services, there are additional flexibilities in provider payment models outside of the traditional “fee for service” model. These flexibilities include:

- Value-Based Payment Agreements
- Single Case Agreements
- In-Lieu-of Services

HCBS Reimbursement Rates

Governor's Budget Recommendation

Increase Specialized Medical Care Rate for I/DD Waiver

The Governor's Budget Recommendation includes an enhancement of \$1.67 million, of which \$665,049 is from the State General Fund, to increase the T1000 Specialized Medical Care rate for the I/DD Waiver to match the increase in rate provided by the 2021 Legislature for the Technology Assisted waiver.

Standardize PCS Rates

The Governor's Budget Recommendation includes an enhancement of \$23.2 million, of which \$9.25 million is from the State General Fund, to standardize HCBS Personal Care Services (PCS) rates across waivers and to provide a further 2.0 percent rate increase.

HCBS Reimbursement Rates

Governor's Budget Recommendation

Service	Procedure Code	Current Rate	Proposed Rate	% Increase
Brain Injury (BI)				
Financial Management Services	T2040 U2	\$125.04	\$127.54	2.00%
Personal Services / Agency-Directed	S5125 U9	\$3.68	\$3.75	2.00%
Personal Services / Self-Directed	S5125 UB	\$3.24	\$3.30	2.00%
PHYSICAL DISABILITY (PD)				
Personal Services / Self-Directed	S5125 U6	\$3.08	\$3.30	7.30%
Personal Services / Agency Directed	S5125 U9	\$3.56	\$3.75	5.44%
Financial Management Services	T2040 U2	\$125.04	\$127.54	2.00%
FRAIL ELDERLY (FE)				
Personal Care Services / Level 1 / Agency Directed	S5130	\$3.68	\$3.75	2.00%
Personal Care Services / Level 2 / Agency Directed	S5125	\$4.06	\$4.14	2.00%
Personal Care Services / Level 3 / Agency Directed	S5125 UA	\$4.49	\$4.58	2.00%
Personal Care Services / Self-Directed	S5125 UD	\$2.96	\$3.30	11.65%
Comprehensive Support / Agency-Directed	S5135	\$3.68	\$3.75	2.00%
Comprehensive Support / Self-Directed	S5135 UD	\$2.96	\$3.30	11.65%
Financial Management Services	T2040 U2	\$125.04	\$127.54	2.00%
TECHNOLOGY ASSISTED (TA)				
Personal Care Services - Agency Directed	T1004	\$4.62	\$4.71	2.00%
Personal Care Services - Self Directed	T1019	\$3.61	\$3.68	2.00%
Financial Management Services	T2040 U2	\$125.04	\$127.54	2.00%
INTELLECTUAL DEVELOPMENTAL DISABILITY (IDD)				
Personal Care Services	T1019	\$3.08	\$3.75	21.87%
Financial Management Services	T2040 U2	\$133.91	\$136.59	2.00%
SEVERE EMOTIONAL DISTURBANCE (SED) Waiver				
Attendant Care	T1019 HK	\$6.52	\$6.65	2.00%

Nursing Facility Reimbursement

Rate Setting Process

- Facility Specific
 - Rates are set specific to each facility based on that facilities reported costs.
- Prospective
 - Rates are set based on a three-year period of reported costs and adjusted for inflation, within available appropriation.
 - FY22 rates include a 2017 to 2019 base period with inflation adjusted through March 2020.
- Per Diem Rate
 - 85% rule for homes over 60 beds

Nursing Facility Reimbursement

Fiscal Year	Base Cost Data Period	Inflation Midpoint	Statewide Average Rate	Cost Center Limits				Combined Statewide Average CMI	Cost Coverage	
				Operating	IDHC	DHC	RPPF		Overall Cost Coverage	DHC Cost Coverage
2009	2005-2007	12/31/2008	\$ 144.26	\$ 28.82	\$ 41.64	\$ 82.18	\$ 8.62	0.9763	96.78%	96.84%
2010	2005-2007	12/31/2008	\$ 150.30	\$ 28.82	\$ 41.64	\$ 82.18	\$ 8.62	0.9763	94.00%	97.00%
2011	2007-2009	12/31/2010	\$ 161.20	\$ 30.60	\$ 44.29	\$ 94.86	\$ 9.05	0.9996	92.00%	96.00%
2012	2008-2010	12/31/2011	\$ 162.13	\$ 31.45	\$ 45.89	\$ 99.24	\$ 9.11	1.0079	95.70%	96.60%
2013	2008-2010	12/31/2011	\$ 150.47	\$ 31.45	\$ 45.89	\$ 99.24	\$ 9.11	1.0079	93.29%	94.93%
2014	2008-2010	12/31/2011	\$ 169.91	\$ 31.45	\$ 45.89	\$ 99.24	\$ 9.11	1.0079	91.93%	90.75%
2015	2010-2012	12/31/2012	\$ 156.95	\$ 31.86	\$ 47.53	\$ 103.42	\$ 9.39	1.0143	92.75%	91.11%
2016	2010-2012	12/31/2012	\$ 158.33	\$ 32.25	\$ 47.78	\$ 103.69	\$ 9.38	1.0144	90.27%	89.43%
2017	2013-2015	6/30/2016	\$ 167.51	\$ 36.18	\$ 52.11	\$ 117.10	\$ 9.72	1.0169	93.68%	91.56%
2018	2014-2016	12/31/2017	\$ 177.73	\$ 38.43	\$ 54.30	\$ 122.14	\$ 9.75	1.0200	95.27%	92.27%
2019	2015-2017	7/31/2018	\$ 189.93	\$ 38.57	\$ 54.50	\$ 129.23	\$ 9.80	1.0253	97.83%	96.79%
2020	2016-2018	12/31/2018	\$ 192.00	\$ 39.13	\$ 54.45	\$ 129.95	\$ 10.01	1.0314	96.25%	95.96%
2021	2016-2018	12/31/2018	\$ 197.50	\$ 39.13	\$ 54.45	\$ 129.95	\$ 10.01	1.0314	93.60%	94.97%
2022	2017-2019	3/31/2020	\$ 204.41	\$ 41.43	\$ 56.30	\$ 134.54	\$ 10.16	1.0419	94.25%	95.63%